

CLAIMS ONLY							Application Number		Filing Date		
							Applicant(s)				
							May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend					Indep
1							51				
2							52				
3							53				
4							54				
5							55				
6							56				
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43							93				
44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
Total							Total				
Indep							Indep				
Total							Total				
Depend							Depend				
Total							Total				
Claims							Claims				